

June 23, 2017

### **VIA ECFS**

Marlene H. Dortch, Secretary Federal Communications Commission Office of the Secretary 445 12th Street, SW Room TW-A325 Washington, DC 20554

RE:

Sagebrush Cellular, Inc., SAC 389013 Submission of FCC Form 481 Annual Report WC Docket No. 14-58 – ETC Annual Reports and Certifications

Dear Ms. Dortch:

Sagebrush Cellular, Inc., Study Area Code 389013, hereby files its FCC Form 481 - Carrier Annual Reporting Data Collection Form in compliance with 47 C.F.R. §§54.313 and 54.422.

The FCC Form 481 has also been filed with the Universal Service Administrative Company and with the relevant state commissions and Tribal governments, as appropriate.

Please contact me if you have any questions.

Sincerely,

Stuart Polikoff

Authorized Representative for Sagebrush Cellular, Inc.

SP/ag

cc: Remi Sun, Sagebrush Cellular, Inc.

T (972) 387-4300 F (972) 960-2810

8750 N. Central Expressway Suite 300 Dallas, TX 75231

Assurance, tax, and consulting offered through Moss Adams LLP. Wealth management offered through Moss Adams Wealth Advisors LLC. Investment banking offered through Moss Adams Capital LLC.

FCC For	rm 481 - Carrier Annual Reporting Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	389013	
<015>	Study Area Name	Sagebrush Cellular, Inc.	
<020>	Program Year	2018	
<030>	Contact Name: Person USAC should contact with questions about this data	Remi Sun	
<035>	Contact Telephone Number: Number of the person identified in data line <030>	4067832358 ext.	
<039>	Contact Email Address: Email of the person identified in data line <030>	remi.sun@nemont.coop	
	Form Type	54.313 and 54.422	

(200) Service Outage Reporting (Voice)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

							July 2013					
<010>	Study Area Co	ode				389013						
<015>	015> Study Area Name s				Sagebrush Ce	ellular, Inc.						
<020>	> Program Year 20			2018								
<030>	Contact Name - Person USAC should contact regarding this data			Remi Sun								
<035>	> Contact Telephone Number - Number of person identified in data line <030> 4067832358 ext.											
<039>	39> Contact Email Address - Email Address of person identified in data line <030> remi.sun@nemont.coop											
<210>	For the prio	r calendar yea	ar, were there	any reportal	ole voice serv	ice outages?	No					
<220>	<a></a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	<e></e>	<f></f>	<g></g>	<h></h>
	NORS Reference Number	Outage Start Date	Outage Start Time	Outage End Date	Outage End Time	Number of Customers Affected	Total Number of Customers	911 Facilities Affected (Yes / No)	Service Outage Description (Check all that apply)	Did This Outage Affect Multiple Study Areas (Yes / No)	Service Outage Resolution	Preventative Procedures
									1			

` '	fulfilled Service Request lection Form				FCC Form 481 OMB Control No. 3060-0986/OMB Control July 2013	No. 3060-0819
<010>	Study Area Code		389013			
<015>	Study Area Name		Sagebrush Cellular, Inc.			
<020>	Program Year		2018			
<030>	Contact Name - Person USAC should contact regarding this data		Remi Sun			
<035>	Contact Telephone Number - Number of person identified in data	a line <030>	4067832358 ext.			
<039>	Contact Email Address - Email Address of person identified in data	a line <030>	remi.sun@nemont.coop			
<300> U	Infulfilled service request (voice)		0	_		
<310> D	Detail on attempts (voice)					
		Name	e of Attached Document		_	
<320> (	Unfulfilled service request (broadband)					
<330>	Detail on attempts (broadband)					_
		N	Jame of Attached Document			

(400) Number of Complaints per 1,000 customers	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	389013
<015>	Study Area Name	Sagebrush Cellular, Inc.
<020>	Program Year	2018
<030>	Contact Name - Person USAC should conta	nct regarding this data Remi Sun
<035>	Contact Telephone Number - Number of p <030>	erson identified in data line 4067832358 ext.
<039>	Contact Email Address - Email Address of p <030>	Derson identified in data line remi.sun@nemont.coop
<400>	Select from the drop-down list to indicate voice complaints (zero or greater) for voice calendar year for each service area in whice any facilities you own, operate, lease, or other services.	telephony service in the prior Offered only mobile voice hyou are designated an ETC for
<410>	Complaints per 1000 customers for fixed v	oice
<420>	Complaints per 1000 customers for mobile	voice 0.0
<430>	Select from the drop-down list to indicate end-user customer complaints (zero or grethe prior calendar year for each service are an ETC for any facilities you own, operate,	eater) for broadband service in ea in which you are designated
<440>	Complaints per 1000 customers for fixed b	roadband
<450>	Complaints per 1000 customers for mobile	broadband

•	npliance With Service Quality Standards and Consumer Protection Rules ection Form		FCC Form 481  OMB Control No. 3060-0986/OMB Control No. 3060-0819  July 2013
<010>	Study Area Code	389013	
<015>	Study Area Name	Sagebrush Cellular, Inc.	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Remi Sun	
<035>	Contact Telephone Number - Number of person identified in data line <030>	4067832358 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	remi.sun@nemont.coop	
<500>	Certify compliance with applicable service quality standards and consumer pr	otection rules Yes	
		389013ND510.pdf	
<510>	Descriptive document for Service Quality Standards & Consumer Protection Ru	ules Compliance	
<515>	Certify compliance with applicable minimum service standards		

(600) Functionality in Emergency Situations Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010> Study Area Code	389013	
<015> Study Area Name	Sagebrush Cellular, Inc.	

<010>	Study Area Code	389013
<015>	Study Area Name	Sagebrush Cellular, Inc.
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Remi Sun
<035>	Contact Telephone Number - Number of person identified in data line <030>	4067832358 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	remi.sun@nemont.coop
<600>	Certify compliance regarding ability to function in emergency situations	Yes
<610>	Descriptive document for Functionality in Emergency Situations	389013ND610.pdf

(700) Price Offerings including Voice Rate Data Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010> Study Area Code	389013	
<015> Study Area Name	Sagebrush Cellular, Inc.	
<020> Program Year	2018	
<030> Contact Name - Person USAC should contact regarding this data	Remi Sun	
<035> Contact Telephone Number - Number of person identified in data	ine <030> 4067832358 ext.	
<039> Contact Email Address - Email Address of person identified in data	line <030> remi.sun@nemont.coop	
<701> Residential Local Service Charge Effective Date  1/1/2017  702> Single State-wide Residential Local Service Charge		

<703>	<a1></a1>	<a2></a2>	<a3></a3>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<b5></b5>	<c></c>
					Residential Local			Mandatory Extended Area	
-	State	Exchange (ILEC)	SAC (CETC)	Rate Type	Service Rate	State Subscriber Line Charge	State Universal Service Fee	Service Charge	Total per line Rates and Fees
-									
									+
•									
-									
-									
					See at	tached worksheet			
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Ĺ									

(710) Broadbrand Price Offerings	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013

<010>	Study Area Code 3	89013
<015>	Study Area Name	Sagebrush Cellular, Inc.
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Remi Sun
<035>	Contact Telephone Number - Number of person identified in data line <030>	4067832358 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	remi.sun@nemont.coop

<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<c></c>	<d1></d1>	<d2></d2>	<d3></d3>	<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached {select }
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-									

(800) Operating Companies	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code		389013
<015>	Study Area Name		Sagebrush Cellular, Inc.
<020>	Program Year		2018
<030>	Contact Name - Person U	ISAC should contact regarding this data	Remi Sun
<035>	Contact Telephone Numb	per - Number of person identified in data line <030>	4067832358 ext.
<039>	Contact Email Address - E	Email Address of person identified in data line <030>	remi.sun@nemont.coop
<810>	Reporting Carrier	Sagebrush Cellular, Inc.	
<811>	Holding Company	Nemont Telephone Cooperative, Inc.	
<812>	Operating Company	Sagebrush Cellular, Inc.	

<813>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
	See atta	ached workshe	et

(900) Tribal Lands Reporting			FCC Form 481
Data Coll	ection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	389013	
<015>	Study Area Name	Sagebrush Cellular, Inc.	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Remi Sun	
<035>	Contact Telephone Number - Number of person identified in data line <030>	4067832358 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	remi.sun@nemont.coop	
<900>	Does the filing entity offer tribal land services? (Y/N)	Yes	
<910>	Tribal Land(s) on which ETC Serves	Turtle Mountain Tribe	
<920>	Tribal Government Engagement Obligation	389013ND920.pdf  Name of Attack	ned Document

to confi	If your company serves Tribal lands, please select (Yes,No, NA) for each these boxes to confirm the status described on the attached PDF, on line 920, demonstrates coordination with the Tribal government pursuant to § 54.313(a)(9) includes:				
<921>	Needs assessment and deployment planning with a focus on Tribal				
	community anchor institutions.				
<922>	Feasibility and sustainability planning;				
<923>	Marketing services in a culturally sensitive manner;				
<924>	Compliance with Rights of way processes				
<925>	Compliance with Land Use permitting requirements				
<926>	Compliance with Facilities Siting rules				
<927>	Compliance with Environmental Review processes				
<928>	Compliance with Cultural Preservation review processes				
<929>	Compliance with Tribal Business and Licensing requirements.				

Select Yes or No or		
Not Applicable		
No		
No		

			1 460 1.
(1000) V	pice and Broadband Service Rate Comparability	FCC Form 481	
<b>Data Coll</b>	ection Form	OMB Control No. 3060	0-0986/OMB Control No. 3060-0819
		July 2013	
<010>	Study Area Code	389013	
<015>	Study Area Name	Sagebrush Cellular, Inc.	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Remi Sun	
<035>	Contact Telephone Number - Number of person identified in data line <030>	4067832358 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	remi.sun@nemont.coop	
4000	No.	Annal de cala la	
<1000>	Voice services rate comparability certification Not	Applicable	
<1010>	Attack datailed description for value complete		
<1010>	Attach detailed description for voice services rate comparability compliance		
	comparability compliance		
		Name of Attached Document	
<1020>	Broadband comparability certification		
.4.020:	Attack database for the Control of		
<1030>	Attach detailed description for broadband		
	comparability compliance		
		Name of Attached Document	
		Hame of Actualica Document	

-	o Terrestrial Backhaul Reporting lection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	389013	
<015> <020>	Study Area Name Program Year	Sagebrush Cellular, Inc. 2018	
<030>	Contact Name - Person USAC should contact regarding this data	Remi Sun	
<035>	Contact Telephone Number - Number of person identified in data line <030>	4067832358 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	remi.sun@nemont.coop	
<1100>	Certify whether terrestrial backhaul options exist (Y/N)	Yes	
<1130>	Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 upstream within the supported area pursuant to § 54.313(g).	kbps	

(1200) Te	erms and Condition for Lifeline Customers			FCC Form 481
Lifeline				OMB Control No. 3060-0986/OMB Control No. 3060-0819
<b>Data Col</b>	lection Form			July 2013
-				
<010>	Study Area Code		389013	
<015>	Study Area Name		Sagebrush Cellular, Inc.	
<020>	Program Year		2018	
<030>	Contact Name - Person USAC should contact regarding this data		Remi Sun	
<035>	Contact Telephone Number - Number of person identified in data line <	:030>	4067832358 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <	<030>	remi.sun@nemont.coop	
		390	013ND1210.pdf	
		369	013ND1210.pdf	
4240	T 0.0 III (V. T. I. I. V. II. D.			
<1210>	Terms & Conditions of Voice Telephony Lifeline Plans			
				Name of Attached Document
<1220>	Link to Public Website HT	TP		
((D)	had there have held to see Constituting the standard day and (A) and Constituting			
	heck these boxes below to confirm that the attached document(s), on line 1210,	,		
	ebsite listed, on line 1220, contains the required information pursuant to			
	(a)(2) annual reporting for ETCs receiving low-income support, carriers must			
annually	report:			
<1221>	Information describing the terms and conditions of any voice	v		
112217	telephony service plans offered to Lifeline subscribers,			
	,			
41223	But the collection of the form of the form of the first	~		
<1222>	Details on the number of minutes provided as part of the plan,			
<1223>	Additional charges for toll calls, and rates for each such plan.	<u> </u>		
	<u> </u>			

Data Coll	ice Cap Carrier Additional Documentation		FCC Form 481  OMB Control No. 3060-0986/OMB Control No. 3060-0819  July 2013
Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers			July 2013
<010>	Study Area Code	389013	
<015>	Study Area Name	Sagebrush Cellular, Inc.	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Remi Sun	
<035>	Contact Telephone Number - Number of person identified in data line <030>	4067832358 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	remi.sun@nemont.coop	

Select the appropriate responses below (Yes, No, Not Applicable) to note compliance as a recipient of Incremental High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e). The information reported on this form and in the documents attached below is accurate.

# **Incremental Connect America Phase I reporting**

<2011>	3rd Year Certification 47 CFR §54.313(b)(1)(ii) - Note that for the July 2017 certification, this applies to Round 2 recipients of Incremental Support.		
<2022>	Recipient certifies, representing year three after filing a notice of acceptance of funding pursuant to 54.312(c), that the locations in		
<2023>	question are not receiving support under the Broadband Initiatives Program or the Broadband Technology Opportunities Program for projects that will provide broadband with speeds of at least 4 Mbps/1Mbps - 54.313(b)(2)(i). Round 2 recipients only. The attachment on line 2024 includes a statement of the total amount of capital funding expended in the previous year in meeting Connect		
	America Phase I deployment obligations, accompanied by a list of census blocks indicating where funding was spent. This covers year three - 54.313(b)(2)(ii). Round 2 recipients only.		
<2024A>	Round 2 Recipient of Incremental Support?		
<2024B>	Attach list of census blocks indicating where funding was spent in year three - 54.313(b)(2)(ii). Round 2 recipients only.	Name of Attached Document Listing Required Information	
<2025A>	Round 2 Recipient of Incremental Support?		
<2025B>	Attach geocoded Information for Phase I milestone reports (Round 2 for year three) - Connect America Fund , WC Docket 10-90, Report and Order, FCC 13-73, paragraph 35 (May 22, 2013).	Name of Attached Document Listing Required Information	
<2015>	2016 and future Frozen Support Certification 47 CFR § 54.313(c)(4)		

(2005) Price Cap Carrier Additional Documentation  Data Collection Form  Including Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013	
<2016>	p Carrier Connect America ICC Support {47 CFR § 54.313(d)} Certification support used to build broadband America Phase II Reporting {47 CFR § 54.313(e)}		
<2017A>	Connect America Fund Phase II recipient?		
<2017C>	Total amount of Phase II support, if any, the price cap carrier used for capital expenditures in 2016.		
<2018>	Attach the number, names, and addresses of community anchor institutions to which the carrier newly began providing access to broadband service in the preceding calendar year - 54.313(e)(1)(ii)(A)	Name of Attached Document Listing Required Information	
<2019>	Recipient certifies that it bid on category one telecommunications and Internet access services in response to all FCC Form 470 postings seeking broadband service that meets the connectivity targets for the schools and libraries universal service support program for eligible schools and libraries located within any area in a census block where the carrier is receiving Phase II model-based support, and that such bids were at rates reasonably comparable to rates charged to eligible schools and libraries in urban areas for comparable offerings - 54.313(e)(1)(ii)(C)		

(3005) Rate Of Return Carrier Additional Documentation	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	389013
<015>	Study Area Name	Sagebrush Cellular, Inc.
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<039>	Contact Email Address - Email Address of person identified in data line <030>	remi.sun@nemont.coop

Select from the drop down menu or check the boxes below to note compliance with 54.313(f)(1). Privately held carriers must ensure compliance with the financial reporting requirements set forth in 47 CFR 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

	Duagraca Danast on E Vacu Dlan			
(3009)	Progress Report on 5 Year Plan Carrier certifies to 54.313(f)(1)(iii)			
(3010A)	Certification of Public Interest Obligations {47 CFR § 54.313(f)(1)(i)}		Γ	
(3010B)	Please Provide Attachment	Name of Attached Docu Information	ment Listing Required	
(3012A)	Community Anchor Institutions {47 CFR § 54.313(f)(1)(ii)}	momuton	Г	
(3012B)	Please Provide Attachment	Name of Attached Docu- Information	ment Listing Required	
(3013)	Is your company a Privately Held ROR Carrier {47 CFR § 54.313(f)(2)}	(Yes/No)	00	
(3014)	If yes, does your company file the RUS annual report	(Yes/No)	0 0	
(3015)	Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:  Electronic copy of their annual RUS reports (Operating Report for Telecommunications			
(3016)	Borrowers)  Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows			
(3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required	Name of Attached Docu Information	ment Listing Required	
(3018)	documentation If the response is no on line 3014, is your company audited? If the response is yes on line 3018, please check the boxes below to confirm your submission on line	(Yes/No)	0 0	
(3019)	3026 pursuant to § 54.313(f)(2), contains: Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers Document(s) for Balance Sheet, Income Statement			
(3021)	and Statement of Cash Flows  Management letter and/or audit opinion issued by the independent certified public accountant that performed the company's financial audit.  If the response is no on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains:			
(3022)	Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers			
(3023)	Underlying information subjected to a review by an independent certified public accountant			
(3024)	Underlying information subjected to an officer certification.			
(3025)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows			
(3026)	Attach the worksheet listing required information	Name of Attached Docu Information	ment Listing Required	

(3005) Rate Of Return Carrier Additional Documentation (Continued)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	389013
<015>	Study Area Name	Sagebrush Cellular, Inc.
<020>	Program Year	2018
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<035>	Contact Telephone Number - Number of person identified in data line <030>	4067832358 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	remi.sun@nemont.coop

Financial Data Summary	
·	
(3027) Revenue	
(3028) Operating Expenses	
(3029) Net Income	
(,	
(3030) Telephone Plant In Service(TPIS)	
(3031) Total Assets	
(3032) Total Debt	
(3033) Total Equity	
(3034) Dividends	

(4005) Rural Broadband Experiment Additional Documentation Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	389013
<015>	Study Area Name	Sagebrush Cellular, Inc.
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Remi Sun
<035>	Contact Telephone Number - Number of person identified in data li	ne <030> 4067832358 ext.
<039>	Contact Email Address - Email Address of person identified in data li	ine <030> remi.sun@nemont.coop

# **4005 Rural Broadband Experiment**

Authorized Rural Broadband Experiment (RBE) recipients must address the certification for public interest obligations, provide a list of newly served community anchor institutions, and provide a list of locations where broadband has been deployed.

# Public Interest Obligations - FCC 14-98 (paragraphs 26-29, 78)

Please address Line 4001 regarding compliance with the Commission's public interest obligations. All RBE participants must provide a response to Line 4001.

**4001**. Recipient certifies that it is offering broadband to the identified locations meeting the requisite public interest obligations consistent with the category for which they were selected, including broadband speed, latency, usage capacity, and rates that are reasonably comparable to rates for comparable offerings in urban areas?

# Community Anchor Institutions – FCC 14-98 (paragraph 79)

**4003a**. RBE participants must provide the number, names, and addresses of community anchor institutions to which they newly deployed broadband service in the preceding calendar year. On this line, please respond (yes – attach new community anchors, no – no new anchors) to indicate whether this list will be provided.

# If yes to 4003A, please provide a response for 4003B.

speed and data usage allowances available in the

relevant geographic area.

4003b. Provide the number, names and addresses of community anchor institutions to which the recipient newly began providing access to broadband service in the preceding calendar year.

Broadband Deployment Locations – FCC 14-98 (paragraph 80)

4004a. Attach a list of geocoded locations to which broadband has been deployed as of the June 1st immediately preceding the July 1st filing deadline for the FCC Form 481.

4004b. Attach evidence demonstrating that the recipient is meeting the relevant public service obligations for the identified locations. Materials must at least detail the pricing, offered broadband Name of Attached Document Listing Required Information

Certification - Reporting Carrier	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
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<015>	Study Area Name	Sagebrush Cellular, Inc.
<020>	Program Year	2018
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<035>	Contact Telephone Number - Number of person identified in data line <030>	4067832358 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	remi.sun@nemont.coop

#### TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

# Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate. Name of Reporting Carrier: Signature of Authorized Officer: Date Printed name of Authorized Officer: Title or position of Authorized Officer: Telephone number of Authorized Officer: Filing Due Date for this form: Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment

under Title 18 of the United States Code, 18 U.S.C. § 1001.

Certification - Agent / Carrier Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010> Study Area Code	389013
<015> Study Area Name	Sagebrush Cellular, Inc.
<020> Program Year	2018

4067832358 ext.

remi.sun@nemont.coop

### TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier				
I certify that (Name of Agent) Moss Adams, LLP also certify that I am an officer of the reporting carrier; my respondent; and, to the best of my knowledge, the reports and data pr	is authorized to submit the information reported on behalf of the reporting carrier. I nsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized ovided to the authorized agent is accurate.			
Name of Authorized Agent: Moss Adams, LLP				
Name of Reporting Carrier: Sagebrush Cellular, Inc.				
Signature of Authorized Officer: CERTIFIED ONLINE	Date: 06/20/2017			
Printed name of Authorized Officer: Remi Sun				
Title or position of Authorized Officer: CFO				
Telephone number of Authorized Officer: 4067832358 ext.				
Study Area Code of Reporting Carrier: 389013	Filing Due Date for this form: 07/03/2017			
, ,	ished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment er Title 18 of the United States Code, 18 U.S.C. § 1001.			

# TO BE COMPLETED BY THE AUTHORIZED AGENT:

Contact Name - Person USAC should contact regarding this data

<035> Contact Telephone Number - Number of person identified in data line <030>

<039> Contact Email Address - Email Address of person identified in data line <030>

Certification of Agent Authorized to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier				
I, as agent for the reporting carrier, certify that I am authorized to submit the annual reports for universal service support recipients or	n behalf of the rep	porting carrier; I have provided		
the data reported herein based on data provided by the reporting carrier; and, to the best of my knowledge, the information reported	herein is accurat	е.		
Name of Reporting Carrier: Sagebrush Cellular, Inc.				
Name of Authorized Agent Firm: Moss Adams, LLP				
Signature of Authorized Agent or Employee of Agent: CERTIFIED ONLINE	Date:	06/19/2017		
Name of Authorized Agent Employee: Moss Adams, LLP				
Title or position of Authorized Agent or Employee of Agent Staff Consultant				
Telephone number of Authorized Agent or Employee of Agent: 5097770231 ext.				
Study Area Code of Reporting Carrier: 389013 Filing Due Date for this form: 07/03/2017				
Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. 18 of the United States Code, 18 U.S.C. § 1001.	C. §§ 502, 503(b), or	fine or imprisonment under Title		



(700) Price Offerings including Voice Rate Data	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	<010> Study Area Code		89013
<015>	Study Area Name	S	agebrush Cellular, Inc.
<020>	Program Year	2	018
<030>	<030> Contact Name - Person USAC should contact regarding this data		emi Sun
<035>	:035> Contact Telephone Number - Number of person identified in data line <030>		1067832358 ext.
<039>	9> Contact Email Address - Email Address of person identified in data line <030>		remi.sun@nemont.coop
<701>	Residential Local Service Charge Effective Date	1/1/2017	
<702>	Single State-wide Residential Local Service Charge		

<703>

<a1></a1>	<a2></a2>	<a3></a3>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<b5></b5>	<c></c>
				Residential Local			Mandatory Extended Area	
State	Exchange (ILEC)	SAC (CETC)		Service Rate	State Subscriber Line Charge		Service Charge	Total per line Rates and Fees
ND			FR	65.0	0.0	0.0	0.0	65.0

(800) Operating Companies	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code		389013
<015>	Study Area Name		Sagebrush Cellular, Inc.
<020>	Program Year		2018
<030>	Contact Name - Person US	AC should contact regarding this data	Remi Sun
<035>	Contact Telephone Number - Number of person identified in data line <030>		4067832358 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>		remi.sun@nemont.coop
<810>	Reporting Carrier	Sagebrush Cellular, Inc.	
<811>	Holding Company	Nemont Telephone Cooperative, Inc.	
<812>	Operating Company	Sagebrush Cellular, Inc.	

<813>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
_	NEMONT TELEPHONE COOPERATIVE, INC.	482247	NEMONT
	MISSOURI VALLEY COMMUNICATIONS, INC.	382247	NEMONT
	SAGEBRUSH CELLULAR, INC.	489006	NEMONT
_	SAGEBRUSH CELLULAR, INC.	489010	NEMONT
_	PROJECT TELEPHONE COMPANY	482250	NEMONT
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# LINE 510 - SERVICE QUALITY STANDARDS AND CONSUMER PROTECTION RULES COMPLIANCE

Sagebrush Cellular, Inc. ("the Company") complies with applicable service quality standards and consumer protection rules for its voice and broadband services.

The Company is in compliance with service quality standards for voice service established by the FCC and the North Dakota Public Service Commission. It also complies with any and all consumer protection obligations under state law.

The Company complies with the CTIA Consumer Code for Wireless Service. Specifically: (1) the Company discloses its rates and terms of service to customers; (2) the Company makes available maps showing where service is generally available; (3) the Company provides contract terms to customers and confirms changes in service; (4) the Company allows a trial period for new service; (5) the Company provides specific disclosures in its advertising; (6) the Company separately identifies carrier charges from taxes on its billing statements; (7) the Company provides customers the right to terminate service for changes to contract terms; (8) the Company provides ready access to customer service; (9) the Company promptly responds to consumer inquiries and complaints received from government agencies; and (10) the Company abides by policies for protection of consumer privacy.

In particular, the Company has a policy and established operating procedures that comply with the FCC's Customer Proprietary Network Information (CPNI) rules (47 C.F.R. §§64.2001-64.2011).

Finally, the Company complies with the FCC's Open Internet rules, 47 C.F.R. §§8.3-8.11. These rules prohibit blocking, throttling, and paid prioritization, and also require the Company to publicly disclose information regarding its network management practices, performance, and the commercial terms of its broadband services.

# LINE 610 - FUNCTIONALITY IN EMERGENCY SITUATIONS

Sagebrush Cellular, Inc. ("the Company") is able to remain functional in emergency situations for both voice and broadband service. The Company has a reasonable amount of back-up power to ensure functionality of voice services without an external power source. Buildings and central offices are equipped with uninterruptible power supply ("UPS") using battery backup and standalone generators. Cell sites are equipped with at least eight hours of battery backup and plug-ins for portable generators. The Company is able to reroute cellular traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations. The Company is fully protected for all cellular traffic which will transfer over to the redundant path in case of an emergency or maintenance. All network transport is designed and installed in a redundant, geo diverse, ring architecture that will automatically transfer over in case of a disruption in service.

### LINE 920 – TRIBAL GOVERNMENT ENGAGEMENT OBLIGATION

Sagebrush Cellular, Inc. ("the Company") serves on tribal lands of the Turtle Mountain Indian Reservation ("the Reservation"). In prior years, the Company has sought to engage with the Reservation, requesting meetings to discuss the topics set forth in 47 C.F.R. §54.313(a)(9), but has never received a response from any tribal government official associated with the Reservation. In 2016, the Company inadvertently failed to contact the Reservation to offer to meet with them. Nevertheless, the Company provides the same high-quality voice and broadband service on the tribal lands contained within its service area as it does throughout the rest of its territory. Also, on July 1, 2016, the Company sent the tribal government a copy of its 2016 Form 481, pursuant to 47 C.F.R §54.313(i), as well as a copy of its Form 690 (Mobility Fund Phase I Annual Report Form).

The Company commits to making the necessary attempts to engage with the Reservation in 2017 and in subsequent years.

# LINE 1210 – TERMS & CONDITIONS OF VOICE TELEPHONY LIFELINE PLANS

Residential customers of Sagebrush Cellular, Inc. ("the Company") residing on non-Tribal lands who qualify for the Lifeline Program receive a federal discount of \$9.25 on voice telephony service. Residential Lifeline customers of the Company residing on Tribal lands receive a discount of up to \$34.25 on voice telephony service (\$9.25 federal discount + up to an additional \$25.00 federal discount). The Tribal Lifeline credit cannot exceed the total of the subscriber residential rate.

In the Company's non-Tribal areas, the Lifeline single-line residential rate is \$55.75 (\$65.00 standard rate - \$9.25 discount).

For customers residing on Tribal lands, the Lifeline single-line residential rate is \$30.75 (\$65.00 standard rate - \$34.25 discount.)

Under the above-mentioned plan, Lifeline customers have an unlimited number of minutes for local and domestic long distance calls and unlimited texting.

Data usage is not included in the above-mentioned voice Lifeline offering. Lifeline customers may subscribe to any residential voice telephony service package that is generally available to the public and will receive the applicable Lifeline discount off of the regular price of the package.